

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

23696

7590

06/26/2013

QUACOMM INCORPORATED
5775 MOREHOUSE DR.
SAN DIEGO, CA 92121

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/802,285	03/16/2004	Vijayalakshmi R. Ravendran	030065	3631

TITLE OF INVENTION: METHOD AND APPARATUS FOR IMPROVING VIDEO QUALITY OF LOW BIT-RATE VIDEO

APPL N, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PATRY, PAKI ISSUE FEE	TOTAL FEES/DUE DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	07/26/2011
EXAMINING	ART F INPT		CLASS. ST-BECLASS			

1. Change of correspondence address or indication of "Free Address": (37 CFR 1.63).
2. Change of correspondence address (or Change of Correspondence Address from PTO/SB1/22) attached.
3. "Free Address" Indication for "Free Address" Indication Form PTO/SB4/7 Rev 03-02 (or more recent) attached. Use of a Customer Number is required.

(1) For printing on the patent front page. List attorneys or agents OK, alternatively.	
(2) The names of up to 3 registered patent attorneys or agents OK, alternatively.	Kevin T. Cheatha
(3) Registered patent attorneys or agents. If no name is listed, no name will be printed.	

(A) NAME OF PATIENT AND RESIDENCE DATA TO BE PRINTED ON THE PATIENT (print or type)
 PLEASE NOTE: Unless an assignee is identified below, the document has been filed for
 recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.
 (B) RESIDENCE, CITY AND STATE OR COUNTRY
 (C) NAME OF ASSIGNMENT

Please check the appropriate assigned category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4b. Payment of Fees? (Please **check** *any* previously paid issue fee shown above)

☒ A check is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

5. **Change in Entity Status** (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Authorized Signature _____
Date 6/22/18

Typed or printed name
Registration No.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.